

**City of Social Circle
Exhumation Permit**

Exhumation Permit # _____

Name of the deceased _____

Date of birth _____ **Deceased date** _____

Exhuming Date _____

Section _____ **Plot** _____ **Site** _____

Consisting of _____ **Grave Sites.**

Name of Cemetery _____

Funeral home _____

Address _____

Phone number _____

Grave Diggers _____

Phone number _____

Contact name of closest relative

Address _____

Phone number _____

Exhumation Permit Fees:

\$75.00 Administrative Fee

\$5.00 Open Grave Fee

Authorized signature _____

City Official signature _____

Please retain exhumation permit on the dig site with grave diggers. Grave must be back filled and grass replaced. If further caving occurs, funeral home or grave digging company will be responsible for any repairs needed.

